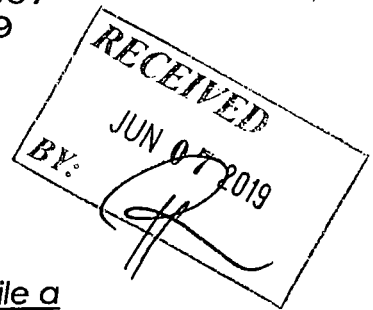


**ARIZONA STATE VETERINARY MEDICAL EXAMINING BOARD**

1740 W. ADAMS ST., SUITE 4600, PHOENIX, ARIZONA 85007

PHONE (602) 364-1PET (1738) FAX (602) 364-1039

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**COMPLAINT INVESTIGATION FORM**

If there is an issue with more than one veterinarian please file a separate Complaint Investigation Form for each veterinarian

PLEASE PRINT OR TYPE

**FOR OFFICE USE ONLY**

Date Received: June 7, 2019

Case Number: 19-88

**A. THIS COMPLAINT IS FILED AGAINST THE FOLLOWING:**

Name of Veterinarian/CVT: Dr KLAYTON H. LAPA D.V.M.

Premise Name: BLUE PEARL Specialty & Emergency Pet HOSPITAL

Premise Address: 9875 W. PEORIA AVE

City: PEORIA State: AZ Zip Code: 85345

Telephone: 623-974-1520

**B. INFORMATION REGARDING THE INDIVIDUAL FILING COMPLAINT\*:**

Name: PATRICIA ACKERMAN

Address: [REDACTED]

City: [REDACTED]

State: [REDACTED]

Zip Code: [REDACTED]

Home Telephone: [REDACTED]

Cell Telephone: [REDACTED]

\*STATE LAW REQUIRES WE HAVE TO DISCLOSE YOUR NAME UNLESS WE CAN SHOW THAT DISCLOSURE WILL RESULT IN SUBSTANTIAL HARM TO YOU, SOMEONE ELSE OR THE PUBLIC PER A.R.S. § 41-1010. IF YOU HAVE REASON TO BELIEVE THAT SUBSTANTIAL HARM WILL RESULT IN DISCLOSURE OF YOUR NAME PLEASE PROVIDE COPIES OF RESTRAINING ORDERS OR OTHER DOCUMENTATION.

**C. PATIENT INFORMATION (1):**

Name: SEAMUS ACKERMAN  
Breed/Species: LABRADOODLE F3  
Age: 6 Sex: M Color: CHOCOLATE

**PATIENT INFORMATION (2):**

Name: \_\_\_\_\_  
Breed/Species: \_\_\_\_\_  
Age: \_\_\_\_\_ Sex: \_\_\_\_\_ Color: \_\_\_\_\_

**D. VETERINARIANS WHO HAVE PROVIDED CARE TO THIS PET FOR THIS ISSUE:**

Please provide the name, address and phone number for each veterinarian.

DR. KLAYTON HLAPA DVM BLUE PEARL  
DR. MICHELE JOHNSON DVM GRAND PAWS

**E. WITNESS INFORMATION:**

Please provide the name, address and phone number of each witness that has direct knowledge regarding this case.

THE VET TECHS AT EACH HOSPITAL.

SEE INVOICES FOR SERVICE FOR ADDRESS  
AND PHONE.

**Attestation of Person Requesting Investigation**

By signing this form, I declare that the information contained herein is true and accurate to the best of my knowledge. Further, I authorize the release of any and all medical records or information necessary to complete the investigation of this case.

Signature: Patricia Ackerman

Date: 6-5-19

**F. ALLEGATIONS and/or CONCERNS:**

Please provide all information that you feel is relevant to the complaint. This portion must be either typewritten or clearly printed in ink.

SEE ATTACHED EXHIBITS

June 5, 2019

Arizona State Veterinary Medical Examining Board  
1740 W. Adams St., Suite 4600  
Phoenix, Arizona 85007

Re: Emergency Office Visit on June 1, 2019 to  
Blue Pearl Veterinary Partners – Peoria  
9875 West Peoria Avenue  
Peoria, Arizona 85345  
623-974-1520

Dear Sirs or Madams,

On June 1, 2019 I took my dog to the Blue Pearl Peoria Veterinary Hospital for Emergency Services. I have attached the following:

- A Narrative regarding the Reason for the Visit and an Explanation of the Visit
- A copy of the First Treatment Plan in the amount of \$2,139.03.
- A copy of the Second Treatment Plan in the amount of \$299.42.
- A copy of the Treatment Plan that Grand Paws executed on June 3, 2019 in the amount of \$114.16.
- A copy of a picture I took of my dog's ear with two staples in it.




I have never experienced such unprofessional treatment of an animal. Because I have had two dogs my entire life, 74 years, I have been exposed to many medical needs required by my animals either due to illness or surgery. I always trusted my vets. I expected that the standards of Blue Pearl would at least be professional and caring. They were not. It was outrageous. Dr. Klayton Lapa never touched his hand onto my dog and yet presented major surgical procedures, even though I told him that it was extreme treatment, without investigating the dimensions of the injury or if Seamus had been further injured while off the premises.

I would appreciate your attention to this matter. Dog Owners go to an Emergency Vet in a stressed time usually frightened for their beloved animal. Taking advantage of the situation is unconscionable. Please see documents attached.

Thank you for your assistance in this matter,

  
Patricia Ackermann

Owner of Seamus, a 6 year old Labradoodle

NARRATIVE OF OFFICE VISIT ON JUNE 1, 2019 TO  
BLUE PEARL VETERINARY PARTNERS – PEORIA  
7:10PM – 1:30AM

Seamus and the other dogs got into a tussle and his ear was hurt. I looked for an emergency vet nearby. I got to Blue Pearl – Peoria at 7:10PM with Seamus' ear tip dropping blood into a paper towel. They took him into the back and put him in a cage. Never said another word to me. At 10:00PM I asked about him and they said he was sleeping in his cage. I asked if they had been able to stop the bleeding. No answers. An hour and one-half later at 11:38 they put me in a room. No Seamus there yet. Then an attendant comes flying into the room and says "Grab your things and follow me". He leads me through waiting room and outside. I am totally confused. "Where is Seamus?" I asked. I thought that maybe he had died and they didn't want to tell me inside the clinic. "He got away and ran out the front door!" I threw my things in my car and ran into the dark calling him. He had a long head start. The place is on Peoria Ave. It is pitch black because no businesses were open this late. I just stood there in the street and called and called him. After 10-15 minutes he came running back. I could hear his leash dragging so I remotely activated the side door of the van and from across Peoria told him "Go to the car Seamus and get in!" I ran over and slid the door closed. The staff were around the car bewildered. He now was bleeding all over the back seat because whatever scab that had begun to coagulate was gone and his heart was pounding so he was producing good blood flow. It is now past midnight. They gave me a loop leash. I told them to stand away and I would leash him up. Then the attendant said to leash him again with a second leash. She then attempted to PULL him out of the car at which point I dropped my purse on the ground and told her that I would take him in and she could take my purse. Some other guy from the vet office was there so I asked him to slide the door closed. Then they let me have Seamus in a room with me. He was panting and frightened.

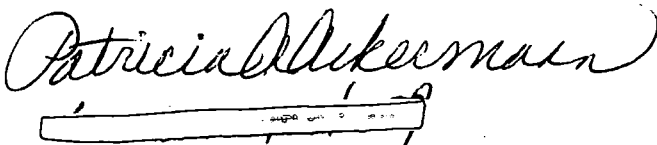
About 15 minutes later in comes the male from the car fiasco and says he is the Vet. He asked me to show him the tear and from where he sat he couldn't really see it. He was seated at the end of the examination table and I was seated in the chair 5 feet from him. Seamus, being a Labradoodle, has ear fringe of about two inches beyond the pinna. Never having put a finger on him, nor seeing if he was further injured during his escape, Dr. Lapa states he is needing to put him under general anesthesia for 40 minutes to stitch the wound. I told him that it was totally unnecessary if Seamus only needed two to three stitches. He disagreed and said he had to have him knocked out. I know how dangerous general anesthesia is. Grand Paws and Lookout Mountain Veterinary Clinics only sedated the animals if truly necessary because of that danger. Over the years my dogs have had surgery in both clinics. Dr. Lapa leaves the room and 45 minutes later the vet tech comes in with a treatment plan of \$2,139.03 which included general anesthetic. I told her no. She then comes back with a plan of \$299.43 for antibiotics and pain meds only. It did not include cleaning the wound or clipping the hair. That was just for \$105.00 for his service, antibiotics and pain meds. I again told her no. I asked about surgical glue or steri-strips or even staples. No comment from her. So 1/2 hour later I left after being charged \$105.00 for the vet's time of 5 minutes of nothing.

As I was leaving the attendant from the car saw us and apologized again for letting him loose. "Her dog would never have run like that!" It was now 1:30 in the morning. I answered the staff, "My dog had been in a tussle, was injured and bleeding. You took him from the only person he knows for 4 1/2 hours. You showed him a way out the door and then you are surprised he tried to run away and find me? He came from over a block and one half away from down a side street, ran back towards my voice, went to the car when I told him to and got in. What did you expect? He dealt well with the trauma of the day and I am proud of him". I left at 1:30AM 6 hours and 20 minutes from when I first arrived and Seamus received no care.

I took Seamus home, cleaned and trimmed the wound area and put antibiotics on the site. It was now 2:15AM. Sunday morning his wound was not bleeding.

Monday morning I took him to Grand Paws and saw Dr. Michele Johnson. She immediately came over to him listened to his chest and inspected the dimensions of the wound. She said he needed two staples, some antibiotics and an e-collar. It took her 15 minutes and no sedation was necessary. I didn't even hear him whimper. My bill was \$114.16.

I have a business background but it would seem to any average person that Blue Pearl charging \$2024.87 more than was necessary is a scam and a disgrace to all the good, decent veterinary clinics and wonderful veterinarians who help our animals in need.

*Patricia Dukeman*  


**Written narrative for case 19-88, In Re: Klayton Lapa**

Seamus Ackermann "patient/pet" presented to the Bluepearl Peoria facility on 06/01/2019 at approximately 7 pm. Patricia Ackermann "client/owner" stated to the triage technician that pet had been involved in a fight with a housemate earlier in the evening. The patient was brought to the treatment area to allow for initial vitals to be taken and triage exam to be performed. I assisted the technician with the gathering of vitals and examined the patient during his triage exam, noting a laceration to the right pinna that appeared to be full thickness but assessment was difficult due to the amount of blood present and pet's haircoat. Pet was placed into a kennel, until I was ready to speak with the owner to prevent pet from bleeding in the lobby. I observed pet multiple times from outside the kennel while working on other patients, to ensure that the bleeding seemed to have stopped and pet was still acting similar to his triage exam. Pet was observed to be QAR in kennel and appeared to be resting comfortably.

When it was time to speak with the client, I requested one of my technical staff to place the owner in an exam room. Prior to going into the exam room, I attempted to remove pet from the kennel in the attempt to better evaluate the extent of pet's wound now that the bleeding has stopped. When I opened the kennel door pet immediately moved to one of the very back corners of the kennel and began having a very nervous appearance. I took a slip lead and attempted to gently toss over pet's head to allow me to remove pet from his kennel. While attempting to get the leash over pet's head he continued to act in a very guarded and nervous manner. Pet suddenly rushed the front of the kennel and slipped past my control. The triage technician saw pet slip from my control and the pet become loose within the treatment area, she hurried to close the door that lead to the exam rooms and front desk area to prevent pet from escaping the treatment area. Pet reached the swinging door leading to the lobby, and immediately bumped the door with his nose and pushed the door open allowing him to pass through. The triage technician was roughly 2-3 strides from pet when he went through the door and I was roughly 1-2 strides from pet, as was not anticipating pet going through the swinging door.

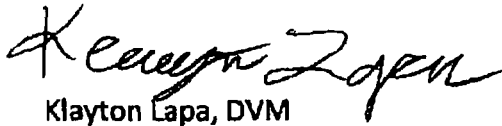
The pet was through the automatic sliding doors of the lobby by the time that I followed him through the swinging doors less than 1 second later. I followed pet outside as I instructed the technician to get the owner from the exam room to see if pet would return to her. As I came outside pet was already beginning to run east on Peoria Ave. I began following pet in the attempt of recapture and to keep a visual to allow owner to locate pet once she was available. Pet ran a total of 0.1 miles east on Peoria Ave, before he turned around and ran back past me to the clinic where the client was across the street. When I returned to clinic pet was already inside the owner's vehicle, and the triage technician was attempting to place two slip leashes onto the pet. Owner instructed the tech to take her bags and she would get the pet out of the car, she then instructed me to close her van door by pushing a button inside.

Owner was placed back into the exam room along with pet, and immediately went to retrieve pet's chart. I went into the exam room and introduced myself as Dr. Lapa, and began collecting history from the owner about the injury and past medical history. Asked the owner if she would be willing to show me the area she was concerned about, as wished to ensure that we were speaking about the same wound. Discussed with the owner that I believed pet had a full

19-88

thickness tear in the right pinna, and recommend surgical repair under general anesthesia as is my standard of practice. I did inform the owner that pet would not be a good candidate for repair under sedation alone due to pet's very nervous nature at this time. Informed owner that due to the laceration being on the ear there is a chance that the repair may fail due to the underlying cartilage being damaged and lack of excess skin to prevent tension along incision line.

Owner never stated her concerns for general anesthesia or that she disagreed with the plan of treatment that was discussed in the exam room. I prepared a treatment plan for the laceration repair and gave it to one of the technical staff to go over with the owner. The technician returned and stated that owner declined the treatment plan for repair and that owner wished for a treatment plan for medications as she planned to follow up with the pDVM in the morning. I provided the technician with a treatment plan for pain medications and antibiotics for treatment until owner could have pet seen by the pDVM. The technician returned to me and informed me that the owner declined the second treatment plan, and only wished for the exam at this time. I wrote discharge instructions, for pet on hearing this and pet was discharge from the hospital. I was not aware of owner's dissatisfaction with her service until she posted a negative Yelp review of her visit.

  
Klayton Lapa, DVM



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**INVESTIGATIVE COMMITTEE REPORT**

**TO:** Arizona State Veterinary Medical Examining Board

**FROM:** PM Investigative Committee: Adam Almaraz - Chair  
Amrit Rai, DVM  
Christine Butkiewicz, DVM  
William Hamilton  
Brian Sidaway, DVM - **Recused**

**STAFF PRESENT:** Tracy Riendeau, CVT – Investigations  
Victoria Whitmore, Executive Director  
Sunita Krishna, Assistant Attorney General  
Mary Williams, Assistant Attorney General

**RE:** Case: 19-88  
Complainant(s): Patricia Ackermann  
Respondent(s): Klayton Lapa, DVM (License: 6394)

**SUMMARY:**

Complaint Received at Board Office: 6/7/19  
Committee Discussion: 8/6/19  
Board IIR: 9/18/19

**APPLICABLE STATUTES AND RULES:**

Laws as Amended August 2018  
(Lime Green); Rules as Revised  
September 2013 (Yellow)

On June 1, 2019, "Seamus," a 6-year-old male Labradoodle was presented to Respondent on emergency with a dog bite wound. The dog was taken into the treatment to be triaged and remained in a kennel until Respondent could speak with Complainant.

Approximately 4 ½ hours later, Complainant was asked to follow staff outside where she was advised that the dog had escaped from the premises. After Complainant found the dog, she was escorted back inside to an exam room with the dog. She stated that Respondent did not evaluate the dog for further injury from the escape and recommended that a laceration on the dog's ear be surgically repaired. Complainant declined both estimates provided for treatment and took the dog home after being at the premises for over 6 hours.

On June 3, 2019, the dog was presented to the primary care veterinarian where the ear laceration was stapled at a significantly less cost.



**Complainant was noticed and appeared.**

**Respondent was noticed and appeared with Counsel, David Stoll.**

**The Committee reviewed medical records, testimony, and other documentation as described below:**

- Complainant(s) narrative: *Patricia Ackermann*
- Respondent(s) narrative/medical record: *Klayton Lapa, DVM*
- Consulting Veterinarian(s) narrative/medical record: *Michelle Johnson, DVM – Grand Paws Animal Clinic*
- Witness(es) narrative: *Blue Pearl Staff*

## **PROPOSED 'FINDINGS of FACT':**

1. On June, 1, 2019, at approximately 7:00pm, the dog was presented to Respondent on emergency due to a dog bite wound. The dog was taken to the treatment area to be triaged and obtain vitals. Respondent stated in his narrative that he assisted technical staff with the vitals and he examined the dog at that time. He noted the laceration to the right pinna that appeared to be full thickness but was difficult to assess due to the amount of blood and the dog's hair coat. The dog was placed in a kennel until Respondent was ready to speak with Complainant. Upon exam, the dog had a weight = 20.1kgs, a temperature = 103.6 degrees, a heart rate = 140bpm and a respiration rate = 45rpm; full thickness laceration to right pinna. While working on other patients, Respondent was able to observe the dog and noted that the bleeding seemed to have stopped and the dog was resting comfortably.

2. At 10:00pm, Complainant asked about the dog and was told he was sleeping in his cage.

3. At 11:38pm, Complainant stated she was escorted to an exam room. A short time later, a staff member rushed into the room and told Complainant to grab her things and follow him. He led Complainant outside and explained that the dog had escaped out the front door. Complainant began calling out for the dog; approximately 10 – 15 minutes later the dog came running back and Complainant was able to get the dog into her vehicle. Premises staff gave Complainant two leashes to place around the dog and the dog was brought back inside and placed into an exam room. Complainant stated that the dog was panting and tired. The escape was not documented in the medical record.

4. After being placed in the exam room, Respondent entered and spoke with Complainant about the dog's injury from the dog bite wound. According to Complainant, Respondent did not touch the dog or evaluate him for further injury after escaping. Respondent advised that he believed the dog had a full thickness tear in the right pinna and recommended surgical repair under anesthesia. He did not feel the dog was a good candidate for sedation due to the dog's nervous nature. Respondent also discussed risks of repair failure due to location.

5. Almost an hour later, technical staff presented an estimate for wound repair (\$2,139.03); Complainant declined. A second estimate was presented for antibiotics and pain meds only, which did not include clipping and prepping the wound (\$299.43); Complainant declined again. Complainant paid for the examination fee and left the premises at approximately 1:30am.

6. After arriving home, Complainant cleaned and trimmed the laceration, and applied a topical

antibiotic.

7. On June 3, 2019, the dog was presented to Dr. Johnson at Grand Paws Animal Clinic for evaluation. The laceration was clipped and cleaned and closed by using staples. The dog was discharged with oral antibiotics and an Elizabethan collar (\$114.16).

### **COMMITTEE DISCUSSION:**

The Committee discussed that mistakes can occur and an animal can escape. However, there were concerns that the escape incident was not documented in the medical record nor was the dog re-evaluated afterwards. If the dog was too agitated to examine, that information should have been recorded as well.

The Committee discussed that the initial estimate that was provided to Complainant was overkill – there was a full hour of general anesthesia among other things that may have been unnecessary. The Committee felt that not all the items listed in the estimate were needed for a minor ear laceration.

There were communication issues in this case in several areas. Although the Complainant was not made aware, Respondent did examine the dog in the treatment area when the dog was originally presented.

### **COMMITTEE'S PROPOSED CONCLUSIONS of LAW:**

The Committee concluded that possible violations of the *Veterinary Practice Act* occurred.

### **COMMITTEE'S RECOMMENDED DISPOSITION:**

**Motion:** It was moved and seconded the Board find:

*ARS § 32-2232 (12) as it relates to AAC R3-11-501 (1) failure to provide professionally acceptable procedure by not documenting the dog's escape in the medical record; and*

*ARS § 32-2232 (21) as it relates to AAC R3-11-502 (L) (4) for failure to perform an examination on the dog following the escape or document in the medical record the reason an exam was not performed.*

**Vote:** The motion was approved with a vote of 4 to 0. Dr. Sidaway was recused.

*The information contained in this report was obtained from the case file, which includes the complaint, the respondent's response, any consulting veterinarian or witness input, and any other sources used to gather information for the investigation.*

DOUGLAS A. DUCEY  
GOVERNOR



VICTORIA WHITMORE  
EXECUTIVE DIRECTOR

## ARIZONA STATE VETERINARY MEDICAL EXAMINING BOARD

1740 W. ADAMS STREET, STE. 4600, PHOENIX, ARIZONA 85007

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IN ACCORDANCE WITH A.R.S. § 32-2237(D): "IF THE BOARD REJECTS ANY RECOMMENDATION CONTAINED IN A REPORT OF THE INVESTIGATIVE COMMITTEE, IT SHALL DOCUMENT THE REASONS FOR ITS DECISION IN WRITING."

At the September 18, 2019 meeting of the Arizona State Veterinary Medical Examining Board, the Board considered the recommendations of the Investigative Committee in regards to case number 19-88 In Re: Klayton Lapa, D.V.M.

The Board considered the Investigative Committee's Findings of Fact and Conclusions of Law:

- ARS § 32-2232 (12) as it relates to AAC R3-11-501 (1) failure to provide professionally acceptable procedure by not documenting the dog's escape in the medical record; and
- ARS § 32-2232 (21) as it relates to AAC R3-11-502 (L) (4) for failure to perform an examination on the dog following the escape or document in the medical record the reason an exam was not performed.

Following discussion, the Board voted to modify the Investigative Committee's recommendation and offer Dr. Lapa a Consent Agreement finding the following:

- ARS § 32-2232 (12) as it relates to AAC R3-11-501 (1) failure to provide professionally acceptable procedures by not documenting the dog's escape in the medical record or the subsequent assessment.

Respectfully submitted this 16<sup>TH</sup> day of October, 2019.

Arizona State Veterinary Medical Examining Board

A handwritten signature in black ink, appearing to read "Jim Loughead", written over a horizontal line.

Jim Loughead - Chair